

REPORT OF RECEIPTS AND DISBURSEMENTS

1 / 73
BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE-PRESIDENT

1. NAME OF COMMITTEE (in full) ROMNEY FOR PRESIDENT, INC.		2. IDENTIFICATION NUMBER C00431171
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 80 HAYDEN AVENUE		
CITY, STATE, and ZIP CODE LEXINGTON MA 02421		3. IS THIS REPORT FOR : <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General

4. TYPE OF REPORT (Check here ☐ if this is a Termination Report.)

☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
☐ January 31 Year End Report

Monthly Report Due On:
☐ February 20 ☐ June 20 ☐ October 20
☐ March 20 ☐ July 20 ☐ November 20
☐ April 20 ☐ August 20 ☒ December 20
☐ May 20 ☐ September 20 ☐ January 31

☐ Twelfth day report preceding Primary (Type of Election)
 election on 11/04/2008 in the State of _____
☐ Thirtieth day report following the General Election on _____
 on _____

IS THIS REPORT AN AMENDMENT ☒ YES ☐ NO

5. COVERING PERIOD		FROM 11/01/2008	THROUGH 11/30/2008
SUMMARY	6. CASH ON HAND AT BEGINNING OF THE REPORTING PERIOD	13005.58	
	7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 2)	12338.57	
	8. SUBTOTAL (Lines 6 and 7)	25344.15	
	9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 2)	2021.33	
	10. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 9 from 8)	23322.82	
	11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P)	0.00	
	12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P)	250000.00	
	13. EXPENDITURES SUBJECT TO LIMITATION	0.00	
NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES	14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B from 17e, Column B, Page 2)	60198527.73	
	15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B from 23, Column B, Page 2)	105115307.04	

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct, and complete.

Type or Print Name of Treasurer Darrell Crate	Date 01/29/2009
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Signature of Treasurer

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. All previous versions of FEC FORM 3P are obsolete and should no longer be used.

For further information contact: Federal Election Commission
999 E Street, N.W.
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 3P
(01/2001)